



# MICKEY LELAND ENVIRONMENTAL INTERNSHIP

AN EQUAL  
OPPORTUNITY/  
AFFIRMATIVE ACTION  
EMPLOYER

## PERSONAL INFORMATION

NAME \_\_\_\_\_ (Last) \_\_\_\_\_ (First) \_\_\_\_\_ (Middle) SSN \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

ADDRESS (Current) \_\_\_\_\_ (Street) \_\_\_\_\_ (City) \_\_\_\_\_ (State) \_\_\_\_\_ (Zip)

(Permanent) \_\_\_\_\_ (Street) \_\_\_\_\_ (City) \_\_\_\_\_ (State) \_\_\_\_\_ (Zip)

PHONE(S): Home (\_\_\_\_\_) \_\_\_\_\_ DRIVER'S LICENSE \_\_\_\_\_ (State) \_\_\_\_\_ (Number)  
Work (\_\_\_\_\_) \_\_\_\_\_

Are you willing to relocate? ☐ Yes ☐ No Geographic preferences in Texas: 1st \_\_\_\_\_  
2nd \_\_\_\_\_ 3rd \_\_\_\_\_ ☐ No Preference

Have you ever worked for the State of Texas? ☐ Yes ☐ No If yes, which agency? \_\_\_\_\_

Do you have a preference in working with a state agency or private organization? ☐ Yes ☐ No If yes, specify \_\_\_\_\_

Do you have any relatives that work for the State of Texas? ☐ Yes ☐ No

If yes, list name(s) and relationship(s) and agency name \_\_\_\_\_

Do you have any relatives on the Mickey Leland Environmental Internship Advisory Committee? ☐ Yes ☐ No

If yes, list name(s) and relationship(s) \_\_\_\_\_

U.S. Military Service? ☐ Yes ☐ No Dates: from \_\_\_\_\_ to \_\_\_\_\_

Some employers require a drug test as part of their employment process. Would you take a drug test if required? ☐ Yes ☐ No

## EDUCATION

COLLEGES OR UNIVERSITIES (Name and location)	Dates Attended				Number of Semester Hours Completed	Graduated		Degrees Received (B.A., etc.)	Major Field of Study
	From		To			Yes	No		
	Mo.	Yr.	Mo.	Yr.					

Are you currently a: ☐ Full Time or a ☐ Part Time student? Current undergraduate status: ☐ Junior ☐ Senior

Current graduate status: ☐ 1st Year ☐ 2nd Year ☐ Other, Explain \_\_\_\_\_

Are you planning to return to school on a full-time basis the coming Fall Semester? ☐ Yes ☐ No

Current Licenses/Certifications/Registrations (indicate types and dates received): \_\_\_\_\_

Special Skills/Qualifications: List all special skills you possess and machines or office equipment you can use, such as calculators, dictation equipment, printing or graphics equipment, data processing equipment/ software, etc.

\_\_\_\_\_  
\_\_\_\_\_

## EMPLOYMENT RECORD

Please indicate employment history. Start with present or most recent position and work back.

Employer:

Mailing Address:

City, State and Zip:

Type of Business:

Immediate Supervisor:

Phone No.: (       )

Starting Date

Leaving Date

Position Title

Current/Final Salary

Mo.

Yr.

Mo.

Yr.

☐ Full Time   ☐ Part Time   ☐ Summer   ☐ Temp./Project   \_\_\_\_\_ Average number of hours worked per week if part time.

Briefly describe your duties and responsibilities: \_\_\_\_\_

Reason for leaving: \_\_\_\_\_

Employer:

Mailing Address:

City, State and Zip:

Type of Business:

Immediate Supervisor:

Phone No.: (       )

Starting Date

Leaving Date

Position Title

Current/Final Salary

Mo.

Yr.

Mo.

Yr.

☐ Full Time   ☐ Part Time   ☐ Summer   ☐ Temp./Project   \_\_\_\_\_ Average number of hours worked per week if part time.

Briefly describe your duties and responsibilities: \_\_\_\_\_

Reason for leaving: \_\_\_\_\_

Employer:

Mailing Address:

City, State and Zip:

Type of Business:

Immediate Supervisor:

Phone No.: (       )

Starting Date

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Position Title

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Mo.

Yr.

Mo.

Yr.

☐ Full Time   ☐ Part Time   ☐ Summer   ☐ Temp./Project   \_\_\_\_\_ Average number of hours worked per week if part time.

Briefly describe your duties and responsibilities: \_\_\_\_\_

Reason for leaving: \_\_\_\_\_

Employer:

Mailing Address:

City, State and Zip:

Type of Business:

Immediate Supervisor:

Phone No.: (       )

Starting Date

Leaving Date

Position Title

Current/Final Salary

Mo.

Yr.

Mo.

Yr.

☐ Full Time   ☐ Part Time   ☐ Summer   ☐ Temp./Project   \_\_\_\_\_ Average number of hours worked per week if part time.

Briefly describe your duties and responsibilities: \_\_\_\_\_

Reason for leaving: \_\_\_\_\_

## STATEMENT OF INTEREST

Describe your motivation for applying and what you expect to gain from participating in this program.  
(Not to exceed one page.)

[illegible]

## COMMUNITY INVOLVEMENT

List all community involvement, offices/positions held or organizations created: \_\_\_\_\_

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## AFFIDAVIT

PLEASE READ THE FOLLOWING STATEMENTS CAREFULLY AND INDICATE YOUR UNDERSTANDING AND ACCEPTANCE BY SIGNING IN THE SPACE PROVIDED.

1. I certify that the information on each page of this application and on any attached documents is true and correct to the best of my knowledge and is given freely of my own will for the purpose of gaining employment with this agency.
2. I understand that any misstatement or omission of material facts or any false information given to obtain employment, promotion, or agency benefits shall be grounds for unfavorable consideration or dismissal from employment.
3. I understand that as a condition of employment, I am required to provide legal proof of authorization to work in the U.S.
4. I understand that some state agencies will check with the Texas Department of Public Safety and/or the Federal Bureau of Investigation for any criminal history in accordance with applicable statutes.
5. I authorize this agency to contact my current/former employers and my educational institution(s) to verify the information contained on this application and authorize my current/former employers and my educational institution(s) to release to this agency any information in their possession pertaining to me. A copy of this release will be as valid as the original.
6. I understand that submission of this application for consideration in the Mickey Leland Environmental Internship Program releases the Texas Natural Resource Conservation Commission and the State of Texas from any liability in the event the applicant has any claim against any of the participating sponsors.

\_\_\_\_\_  
Applicant's Signature

\_\_\_\_\_  
Date

This application should be submitted with a current transcript, personal resume and a letter of recommendation to the following address:

Internship Program Coordinator, MC 116  
Mickey Leland Environmental Internship Program  
Texas Natural Resource Conservation Commission  
P.O. Box 13087  
Austin, Texas 78711-3087



# MICKEY LELAND ENVIRONMENTAL INTERNSHIP

## MONITORING DATA INFORMATION

The following information is voluntary and will only be used for statistical data required by the Equal Employment Opportunity Commission. This information is authorized by Title VI and VII and the Civil Rights Act of 1964. This information will not be used for hiring purposes, nor will the information be released. This will not be included in your personnel file should you be employed by the Mickey Leland Environmental Internship Program.

Date: \_\_\_\_\_ ☐ Male ☐ Female

Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Social Security Number: \_\_\_\_\_ -- \_\_\_\_\_ --

Check Appropriate Box(s):

- |                                |   |   |
|--------------------------------|---|---|
| <input type="checkbox"/> White | <input type="checkbox"/> Hispanic                       | <input type="checkbox"/> Asian/Pacific Islander |
| <input type="checkbox"/> Black | <input type="checkbox"/> American Indian/Alaskan Native | <input type="checkbox"/> Other                  |

Recruitment Source:

- |  |   |   |
|--|---|---|
| <input type="checkbox"/> Career Fair           | <input type="checkbox"/> Recruitment Coordinator                      | <input type="checkbox"/> Previous Mickey Leland Intern (year) _____ |
| <input type="checkbox"/> Walk-In               | <input type="checkbox"/> College or University Placement Center _____ |   |
| <input type="checkbox"/> Other (specify) _____ |   |   |

Do you consider yourself economically disadvantaged? ☐ Yes ☐ No